

FINAL BILL REPORT

ESSB 6180

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Synopsis as Enacted

Brief Description: Concerning the training and background checks of long-term care workers.

Sponsors: Senate Committee on Ways & Means (originally sponsored by Senators Keiser, Tom and Prentice).

Senate Committee on Ways & Means

Background: "Long-term care workers" refers to persons who provide personal care to elderly and individuals with disabilities. The personal care tasks are frequently referred to as "activities of daily living" and include activities such as eating, bathing, toileting, self-medicating, and dressing. Long-term care workers can be employed in a community based facility (for example, adult family homes and boarding homes), can be directly employed by the individual needing care, or can be contracted by a home care agency to provide care for an individual or several individuals. In many instances, long-term care workers are related to their client and sometimes reside together. Depending on the specific provider to client relationship, long-term care workers may also be referred to as individual providers and agency providers, or sometimes by the collective term home care worker or home care provider.

Publicly funded programs operated by the Department of Social and Health Services (DSHS) – Aging and Disability Services Administration (ADSA) authorize hours of personal care for clients based on an assessment of individual need. ADSA clients can receive authorization for personal care assistance through the Medicaid personal care (MPC) program and can also receive authorization for MPC as part of a Medicaid waiver program such as the Community Options Program Entry System or Basic Waivers. The average monthly cost per client for MPC varies between \$1,300 and \$1,400. Based on the March 2009 caseload forecast, the 2009-11 MPC caseload is expected to total nearly 60,000 clients.

Several sections of current law address the training, employment, collective bargaining, and working conditions for long-term care workers. In addition, Initiative 1029 (approved in the November 2008 general election) specified certain background check, training, and certification mandates for all long-term care workers. The major provisions of Initiative 1029 are:

- a state paid background check, including a fingerprint check against the Federal Bureau of Investigation (FBI) databases;

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- the establishment of a home care aide certification program in the Department of Health (DOH);
- a tiered training program for all long-term care workers (varies between 15 and 150 hours);
- continuing education requirements for all long-term care workers (12 hours per year); and
- a requirement that individual providers (those long-term care workers directly employed by the person receiving care) be compensated for the hours they spend in training.

Most of the provisions of Initiative 1029 go into effect January 1, 2010, although the requirement that DSHS make available 70 hours of optional, additional training (sometimes referred to as advanced topics training) goes into effect January 1, 2011.

Current law requires that DSHS make training available for long-term care workers and that individual providers receive their training through a dedicated training partnership and that the state contribution to that training partnership be made subject to a collective bargaining agreement.

Summary: The effective dates for sections of I-1029 to delay implementation are amended. The enhanced background checks and advanced training are delayed until January 1, 2012, and basic training and continuing education are delayed until January 1, 2011. Technical corrections are made to background check requirements.

Certain institutional and facility employees are excluded from the definition of "long-term care worker."

Votes on Final Passage:

Senate	45	4
House	72	22

Effective: July 26, 2009
September 1, 2009 (Section 16)